

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 6730141

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5		3				
6		3				
7		3				
8		3				
9		3				
10		3				
11		3				
12		1				
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		2				
21		2				
22		3				
23		3				
24		3				
25		1				
26		3				
27		3				
28		3				
29		1				
30		1				
31		2				
32		1				
33		1				
34		1				
35		1				
36		1				
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47						
48						
49						
50						
TOTAL IND.	2		2			
TOTAL DEP.	63		63			
TOTAL CLAIMS	65		65			

	IND	DEP	IND	DEP	IND	DEP
51						
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TOTAL CLAIMS						